



Prevention

RENAL SYMPATHETIC DENERVATION FOR TREATMENT OF RESISTANT HYPERTENSION: TWO-YEAR UPDATE FROM THE SYMPPLICITY HTN-2 RANDOMIZED CONTROLLED TRIAL

Oral Contributions

North, Room 121

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Session Title: Prevention: Blood Pressure - Hot Topics for 2013

Abstract Category: 1. Acute Coronary Syndromes: Clinical

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Background: Radiofrequency ablation of renal artery nerves has been shown to reduce blood pressure (BP) in patients with severe, treatment-resistant hypertension (rHTN, BP uncontrolled on at least 3 antihypertensive drugs). Longer follow-up of subjects undergoing renal denervation (RDN) is essential to establish the long-term safety and reliability of this novel treatment intervention.

Methods: The Symplicity™ HTN-2 trial randomized subjects with rHTN and systolic BP ≥ 160 mm Hg to treatment by RDN or to maintenance on prior therapy. Control subjects were eligible to crossover to RDN at 6 months. All subjects were followed for 2 years (18 months post-RDN for crossover patients) to assess long-term effectiveness and safety of RDN.

Results: At baseline, more crossover than RDN subjects were female (60% vs 35%), and 40% of the RDN and 30 % of the crossover group subjects had type 2 diabetes. BP was significantly lower than baseline at each time point (table). Pulse pressure was reduced -18.5 in the RDN group at 24 months and -17.6 in the crossover group at 18 month ($p < 0.01$ for both). Heart rate was reduced by renal denervation (table), presumably due to central sympathetic inhibition from afferent nerve ablation. No device-related serious adverse events occurred.

Conclusions: RDN with the Symplicity catheter consistently reduced systolic BP by 28-32 mm Hg over 2 years with no safety concerns.

| Office BP (mm Hg) | Initial RDN | Cross-over to RDN | Heart Rate (bpm) | Initial RDN | Cross-over to RDN |
|--|---|--|-------------------------------|---|---|
| Pre-procedure baseline† Systolic BP Diastolic BP | (n=52) 178.2 \pm 17.7 97.0 \pm 15.8 | (n=37) 190.9 \pm 19.6 101.4 \pm 16.2 | Pre-procedure baseline† | (n=52) 74.7 \pm 14.9 | (n=37) 71.8 \pm 15.3 |
| 6 mo. Δ from baseline Systolic BP Diastolic BP | (n=49) -31.7 \pm 23.1 -11.7 \pm 11.2 | (n=35) -23.7 \pm 27.5 -8.4 \pm 12.1 | 6 mo. Δ from baseline | (n=49) -4.9 \pm 10.2 $p < 0.01$ | (n=35) -2.6 \pm 13.9 $P = 0.28$ |
| 12 mo. Δ from baseline Systolic BP Diastolic BP | (n=47) -28.1 \pm 24.9 -9.7 \pm 10.6 | (n=33) -23.8 \pm 30.5 -9.99 \pm 12.4 | 12 mo. Δ from baseline | (n=47) -5.0 \pm 9.0 $p < 0.01$ | (n=33) -6.4 \pm 13.1 $p < 0.01$ |
| 18 mo Δ from baseline Systolic BP Diastolic BP | (n=43) -32.3 \pm 26.1 -12.5 \pm 13.2 | (n=31) -28.4 \pm 32.4 -10.8 \pm 12.2 | 18 mo Δ from baseline | (n=43) -5.2 \pm 13.6 $p = 0.02$ | (n=31) -1.8 \pm 9.0 $p = 0.27$ |
| 24 mo Δ from baseline Systolic BP Diastolic BP | (n=40) -28.87 \pm 21.6 -10.4 \pm 11.2 | N/A | 24 mo Δ from baseline | (n=40) -4.3 \pm 12.3 $p = 0.03$ | N/A |

$p < 0.01$ for all BP changes from baseline; †Crossover group pre-procedure baseline is at 6 months post randomization